B1 (Official	Form 1)(1/	(08)									
			United Sout			ruptcy f Califor		t		Voluntary Petition	
	ebtor (if ind Satin Sh		er Last, First	Middle):			Nan	Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): FKA Satin Klitzke-Smith; FKA Satin Chambers							All (inc	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):			
	one, state all)		vidual-Taxpa	ayer I.D. (ITIN) No./	Complete E		four digits of the four than one, s		or Individual-Taxpayer I.D. (ITIN) No./Complete EI	
Street Addre	ess of Debto		Street, City,	and State)	:	ZID C. I		et Address of	f Joint Debtor	or (No. and Street, City, and State):	
					Г	ZIP Code 92064				ZIP Code	
County of R San Die		of the Prin	cipal Place o	f Busines			Cou	nty of Reside	ence or of the	e Principal Place of Business:	
Mailing Add	dress of Del	otor (if diffe	rent from str	eet addres	ss):		Mai	ling Address	of Joint Deb	otor (if different from street address):	
					г	ZIP Code	:			ZIP Code	
Location of (if different			siness Debtor	•			I				
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)			Sing in 1 Rail Stoo	(Checl lth Care Bu gle Asset Ro 1 U.S.C. § road ckbroker amodity Br aring Bank er Tax-Exe (Check box tor is a tax- er Title 26 of	eal Estate as 101 (51B)	s defined (e) (anization) (d States	Chapter 11 of a Foreign Main Proce Chapter 12 Chapter 15 Petition for I Chapter 13 of a Foreign Nonmain P Nature of Debts (Check one box) Debts are primarily consumer debts, Debt defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for				
Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					Che Che	Debtor is ck if: Debtor's to insider ck all applica A plan is Acceptan	a small busing not a small busing aggregate not a small busing aggregate not a sor affiliates able boxes: being filed we ces of the pla	Chapter 11 Debtors iness debtor as defined in 11 U.S.C. § 101(51D). business debtor as defined in 11 U.S.C. § 101(51D). concontingent liquidated debts (excluding debts oweds) are less than \$2,190,000. with this petition. In were solicited prepetition from one or more a accordance with 11 U.S.C. § 1126(b).			
Debtor e	estimates that estimates that	at funds will at, after any	ation be available exempt propfor distribut	erty is ex	cluded and	administrat			ereditors, in	THIS SPACE IS FOR COURT USE ONLY	
Estimated N	Number of C 50- 99	Creditors 100- 199	□ 200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000		
Estimated A \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,0 to \$500 million	001 \$500,000,001 to \$1 billion			
Estimated L \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,0 to \$500 million	001 \$500,000,001 to \$1 billion			

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): **Voluntary Petition** Klitzke, Satin Sharee (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Date Filed: Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Richard L. Stevenson April 14, 2009 Signature of Attorney for Debtor(s) (Date) Richard L. Stevenson 239705 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(1/08) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Satin Sharee Klitzke

Signature of Debtor Satin Sharee Klitzke

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

April 14, 2009

Date

Signature of Attorney*

X /s/ Richard L. Stevenson

Signature of Attorney for Debtor(s)

Richard L. Stevenson 239705

Printed Name of Attorney for Debtor(s)

The Law Office of Richard L. Stevenson

Firm Name

7670 Opportunity Road, Ste. 230 San Diego, CA 92111

Address

Email: rls@rls-law.com

858-337-9557 Fax: 866-560-1071

Telephone Number

April 14, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Klitzke, Satin Sharee

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D(Official Form 1, Exhibit D) (12/08)

United States Bankruptcy Court Southour District of Colifornia

		Southern District of Camornia		
In re	Satin Sharee Klitzke		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ___

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: // // Satin Sharee Klitzke
Satin Sharee Klitzke
Date: April 14, 2009

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Southern District of California

In re	Satin Sharee Klitzke		Case No.	
_		Debtor	Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	30,499.40		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		41,009.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		62,098.60	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,883.81
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,277.05
Total Number of Sheets of ALL Schedu	ıles	21			
	T	otal Assets	30,499.40		
			Total Liabilities	103,107.60	

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Southern District of California

		Southern District of Camorina		
In re	Satin Sharee Klitzke		Case No	
-		Debtor		
			Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	2,883.81
Average Expenses (from Schedule J, Line 18)	3,277.05
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,226.13

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		16,109.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		62,098.60
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		78,207.60

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•		
In re	Satin Sharee Klitzke	Case No.
•		Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Claim or Exemption

Amount of Secured Claim or Exemption

None

B6A (Official Form 6A) (12/07)

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Satin Sharee Klitzke		Case No.	
		D-1-4	_ ;	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.			Checking account, number -0629	-	0.81
	accounts, certificates of deposit, or shares in banks, savings and loan,		Location:		
	thrift, building and loan, and homestead associations, or credit		Bank of America		
	unions, brokerage houses, or cooperatives.		Savings account, number -8674	-	2.47
			Location:		
			Bank of America		
			Savings account, number -7700	-	61.95
			Location:		
			San Diego County Credit Union		
			Savings account, number -9825	J	50.00
			Location:		
			San Diego County Credit Union		
			Checking account, number -4527	-	715.88
			Location:		
			US Bank		
			Savings account, number -3004	-	0.00
			Location:		
			US Bank		
			_	Sub-Tota	al > 831.11

³ continuation sheets attached to the Schedule of Personal Property

(Total of this page)

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Satin Sharee Klitzke	Case No.
		·

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		Savings account, number -9899	J	15.08
		Location:		
		USA Federal Credit Union		
3.	Security deposits with public	Security deposit with landlord	-	1,500.00
	utilities, telephone companies, landlords, and others.	Location: Elisa Ballard 14142 Palisades Drive, Poway, CA 92064		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Couch, coffee table, kitchen table, 2 king mattresses, dresser, night stands, 1 TV, 1 VCR, 1 laptop computer, usuand customary household goods, furnishings, appliances, utensil dishware, linens, etc., no single item worth more than \$525.00 Location: 13560 Comuna Drive, Poway CA		1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Various books, music CD's and collectibles. Location: 13560 Comuna Drive, Poway CA	-	250.00
6.	Wearing apparel.	Various items of clothing and wearing apparel. Location: 13560 Comuna Drive, Poway CA	-	500.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X		
		(7)	Sub-Tot	al > 3,765.08

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Total of this page)

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Satin Sharee Klitzke	Case No.
_		·

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing		401(k) plan	-	1,003.21
	plans. Give particulars.		Location: Sentry Life Insurance Company		
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
				Sub-Total of this page)	al > 1,003.21

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Total of this page)

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Satin Sharee Klitzke	Case No.
		·

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2007 Honda Civic LX Sedan 4 door. Location: 13560 Comuna Drive, Poway CA	-	12,950.00
			2005 Chevrolet Suburban 1500 Sport Utility	J	11,950.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 24,900.00 (Total of this page)

Total > **30,499.40**

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

B6C (Official Form 6C) (12/07)

In re	Satin Sharee Klitzke		Case No.	
_		Debtor		

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitle (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)	d under: Check if d \$136,875.	ebtor claims a homestead exe	mption that exceeds
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts Checking account, number -0629	, Certificates of Deposit C.C.P. § 703.140(b)(5)	0.81	0.81
Location:			
Bank of America			
Savings account, number -8674	C.C.P. § 703.140(b)(5)	2.47	2.47
Location:			
Bank of America			
Savings account, number -7700	C.C.P. § 703.140(b)(5)	61.95	61.95
Location:			
San Diego County Credit Union			
Savings account, number -9825	C.C.P. § 703.140(b)(5)	50.00	50.00
Location:			
San Diego County Credit Union			
Checking account, number -4527	C.C.P. § 703.140(b)(5)	715.88	715.88
Location:			
US Bank			
Savings account, number -9899	C.C.P. § 703.140(b)(5)	15.08	15.08
Location:			
USA Federal Credit Union			
Security Deposits with Utilities, Landlords, and C Security deposit with landlord	<u>Others</u> C.C.P. § 703.140(b)(5)	1,500.00	1,500.00
Location: Elisa Ballard 14142 Palisades Drive, Poway, CA 92064			
Household Goods and Furnishings Couch, coffee table, kitchen table, 2 king mattresses, dresser, night stands, 1 TV, 1 VCR, 1 laptop computer, usual and customary household goods, furnishings, appliances, utensils, dishware, linens, etc., no single item worth more than \$525.00 Location: 13560 Comuna Drive, Poway CA	C.C.P. § 703.140(b)(3)	1,500.00	1,500.00

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

In re	Satin Sharee Klitzke		Case No.	
_		Debtor	- ,	

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT (Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Books, Pictures and Other Art Objects; Collectibles Various books, music CD's and collectibles. Location: 13560 Comuna Drive, Poway CA	C.C.P. § 703.140(b)(5)	250.00	250.00
Wearing Apparel Various items of clothing and wearing apparel. Location: 13560 Comuna Drive, Poway CA	C.C.P. § 703.140(b)(3)	500.00	500.00
Interests in IRA, ERISA, Keogh, or Other Pension o 401(k) plan	r Profit Sharing Plans C.C.P. § 703.140(b)(10)(E)	1,003.21	1,003.21

Location:

Sentry Life Insurance Company

Total: 5,599.40 5,599.40 B6D (Official Form 6D) (12/07)

In re	Satin Sharee Klitzke		Case No.	
_		Debtor		

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Contingent". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	L I O	S P U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxx0104			April 4, 2007	T	E			
San Diego County Credit Union PO Box 269040 San Diego, CA 92196-9040	x	J	Purchase Money Security 2005 Chevrolet Suburban 1500 Sport Utility		D			
			Value \$ 11,950.00				21,140.00	9,190.00
Account No. xxxxxxx0105			February 26, 2009					
San Diego County Credit Union PO Box 269040 San Diego, CA 92196-9040		-	Non-Purchase Money Security 2007 Honda Civic LX Sedan 4 door. Location: 13560 Comuna Drive, Poway CA					
			Value \$ 12,950.00				19,869.00	6,919.00
Account No.			Value \$					
Account No.								
			Value \$	-				
continuation sheets attached	- -		(Total of t		tota pag		41,009.00	16,109.00
			(Report on Summary of Sc		Tota lule		41,009.00	16,109.00

B6E (Official Form 6E) (12/07)

•				
In re	Satin Sharee Klitzke		Case No.	
-		Debtor		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Satin Sharee Klitzke	Case No.	
_		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C		CONTINGEN	UNLLQULDAT	SPUTE	1
Account No. xxxx0526 Accounts Receivable Mgmt PO Box 129 Thorofare, NJ 08086-0129		_	January 12, 2009 Collection account for HSBC Reward Zone account. Listed for notice purposes only.	T	T E D		0.00
Account No. GTB325 Alliance One Receivables Mgmt 1160 Centre Point Dr., Ste. 1 Saint Paul, MN 55120		-	March 12, 2009 Collection account for Citibank. Listed for notice purposes only.				0.00
Account No. xxxxxxxxxxxxxx7712 American Express P.O. Box 981537 El Paso, TX 79998-1537		_	Between December 2006 and November 2007 Credit card purchases			x	1,289.00
Account No. xxxx-xxxx-xxxx-3302 Bank Of America PO Box 15726 Wilmington, DE 19850-5726		-	Between May 2007 and March 2008 Credit card purchases on Alaska Airlines Mileage Plan card.				8,834.00
_6 continuation sheets attached	•	•	(Total of t	Subi his			10,123.00

In re	Satin Sharee Klitzke		Case No.	
		Debtor	,	

		_		_		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXF-XGEX	021-00-04	SPUTE	AMOUNT OF CLAIM
Account No. xxxx-xxxx-x769			Between November 2006 and December 2008	T	DATED		
Capital One PO Box 30281 Salt Lake City, UT 84130-0281		-	Credit card purchases		D		713.00
Account No. xxxx-xxxx-7841	+		From November 2007 until September 2008	H			
Chase PO Box 15298 Wilmington, DE 19850-5298		-	Credit card purchases				
	┸			igspace			8,117.00
Account No. ChexSystems Attn: Consumer Relations 7805 Hudson Rd, Ste. 100 Saint Paul, MN 55125-1703		-	Listed for notice purposes only.				0.00
Account No. xxxx-xxxx-8109	t		Between August 2007 and July 2008	H			
Citi PO Box 6241 Sioux Falls, SD 57117		-	Credit card purchases on Citibank Visa card.				3,469.00
Account No. xxxxxxxxxx7002	T		Between August 2001 and December 2008	\vdash	H		
Citi-Shell Shell Card Center PO Box 689151 Des Moines, IA 50368-9151		_	Purchases on Shell gas card.				1,216.00
Sheet no1 of _6 sheets attached to Schedule of	_			Subt			13,515.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis j	pag	e)	10,010.00

In re	Satin Sharee Klitzke		Case No.	
		Debtor	,	

	1.0		when d Wife Isiat as Occasion	<u> </u>	1	I 5	ı
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LIQUI	S P U T E	AMOUNT OF CLAIM
Account No. 8817			March 6, 2009	Ť	D A T E D		
Creditors Interchange 80 Holtz Drive Buffalo, NY 14225		_	Collection account for Bank of America (aka FIA Card Services). Listed for notice purposes only.		D		
Account No. xxxxxxxx6861			Between December 1997 and September 2008				0.00
Department Stores Nat'l Bank Po Box 8066 Mason, OH 45040		_	Purchases on Macy's charge account.				
							3,023.00
Account No. xxx3646 Encore Receivable Managment 400 N. Rogers Rd PO Box 3330 Olathe, KS 66063-3330		_	January 2009 Collection account for GE Money Bank/Care Credit. Listed for notice purposes only.				0.00
Account No.	┢		Listed for notice purposes only.				
Equifax PO Box 740256 Atlanta, GA 30374-0256		_					0.00
Account No.			Listed for notice purposes only.			\vdash	
Experian PO Box 9554 Allen, TX 75013-9554		_					0.00
Sheet no. 2 of 6 sheets attached to Schedule of	<u> </u>	<u> </u>	<u> </u>	ub	tota	ıl	2 022 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis	pag	ge)	3,023.00

In re	Satin Sharee Klitzke		Case No.	
		Debtor	,	

	Ιc	ш	sband, Wife, Joint, or Community	Τc	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	ONLIQUIDAT	lιΙ	AMOUNT OF CLAIM
Account No.			Listed for notice purposes only.	٦ [T E D		
Franchise Tax Board Bankruptcy Unit PO Box 2952 Sacramento, CA 95812-2952		-			D		0.00
Account No. 8769	T		March 20, 2009				
GC Services LP Collection Agency Division 6330 Gulfton Houston, TX 77081		-	Collection account for Capital One. Listed for notice purposes only.				0.00
Account No. xxxxxxxxxxxx2658			Between October 2007 and July 2008				
GE Money Bank Attn: Bankruptcy Dept. PO Box 103104 Roswell, GA 30076		_	Care Credit charge account				6,011.00
Account No. xxxxxxxxxxxx6638			Between October 2006 and September 2008				
Home Depot Credit Services PO Box 689100 Des Moines, IA 50368-9100		-	Purchases on The Home Depot charge account.				
							2,862.00
Account No. xxxx-xxxx-xxxx-3481 HSBC-Reward Zone Program Mastercard PO Box 80045 Salinas, CA 93912-0045		_	Between May 2008 and September 2008 Purchases on Best Buy Reward Zone Mastercard.				2,480.00
Sheet no. _3 of _6 sheets attached to Schedule of		<u> </u>		Subt	Ota	1	<u> </u>
Creditors Holding Unsecured Nonpriority Claims			(Total of t				11,353.00

In re	Satin Sharee Klitzke	Case No.
-		Debtor

		_				_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	H>U-CO-LZC	D _	AMOUNT OF CLAIM
Account No.			Listed for notice purposes only.	Т	T E D		
Internal Revenue Service Insolvency Group 1 880 Front Street San Diego, CA 92101-7776		-			D		0.00
Account No.			Listed for notice purposes only.	t	Н		
Internal Revenue Service Cent. Insolvency Operations PO Box 21126 Philadelphia, PA 19114-0326		-					0.00
Account No. xxxxx4222			Between June 2002 and September 2008				
Nordstrom FSB Po Box 13589 Scottsdale, AZ 85267		_	Purchases on Nordstrom charge account.				1,216.00
Account No.			March 2009		Н		
North Shore Agency, Inc. 270 Spagnoli Road Melville, NY 11747		-	Collection account for People Magazine. Listed for notice purposes only.				
Account No. www2254			Moreh 46, 2000				0.00
Account No. xxx3354 Omni Credit Services of FL PO Box 23381 Tampa, FL 33623-3381		_	March 16, 2009 Collection account for Macy's. Listed for notice purposes only.				0.00
				<u>L</u>	Ш		0.00
Sheet no. <u>4</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt his j			1,216.00

In re	Satin Sharee Klitzke	Case No	
		Debtor	

	1.0	11	sband, Wife, Joint, or Community	1.0	111	Ь	i
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	DZ LL QULDAH ED	U T F	AMOUNT OF CLAIM
Account No.	-		March 2009 Unpaid subscription balance	ļ ·	Ė		
People Magazine Customer Service PO Box 6001 Tampa, FL 33660-0001		_	onpaid subscription balance			х	87.60
Account No. 6688	╁	\vdash	March 9, 2009	H			
Shedrick O Davis III JP Morgan Chase 300 S. Grand Ave., 4th Floor Los Angeles, CA 90071		_	Chase legal department, collecting for Chase. Listed for notice purposes only.				0.00
Account No.	╁		Listed for notice purposes only.				
Telecheck Services 5251 Westheimer Houston, TX 77056	-	_					0.00
Account No.			Listed for notice purposes only.				
TransUnion PO Box 2000 Crum Lynne, PA 19022-2002		_					0.00
Account No. xxxx9132	\vdash		January 23, 2009	_		_	0.00
United Recovery Systems PO Box 722929 Houston, TX 77272-2929	-	_	Collection account for Citibank. Listed for notice purposes only.				
	L	L			L	L	0.00
Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	Subt			87.60

In re	Satin Sharee Klitzke		Case No	
		Debtor		

						_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	- C	U	[Ρĺ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NGENT	L I Q U I D A T	E E	S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxx0700	1		July 20, 2007	'	E		1	
Usa Fed Credit Union P.O. Box 26339 San Diego, CA 92196-0339	x	J	Unsecured loan		D			20,682.00
Account No. xxxxx1807	╁	\vdash	Between February 2005 and September 2008	+	+	t	+	
			Purchases on The Limited charge account.					
WFNNB Attn: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125		-						
Columbus, Cit 10210 2120								520.00
Account No. xxxxx1531 WFNNB Attn: Bankruptcy Dept. PO Box 182125		-	Between May 1998 and September 2008 Purchases on Victoria's Secret charge account.					
Columbus, OH 43218-2125								1,579.00
Account No.	-							
Account No.	\dagger					+	1	
Sheet no. <u>6</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		1	Yotal of t	Sub his			;)	22,781.00
			(Report on Summary of So	7	Γot	al	Ī	62,098.60

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In re Satin Sharee Klitzke

Debtor

Case No. ______

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Elisa Ballard 14142 Palisades Drive Poway, CA 92064

B6G (Official Form 6G) (12/07)

Debtor is a tenant on a residential lease.

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B6H (Official Form 6H) (12/07)

In re	Satin Sharee Klitzke		Case No.
-		Debtor	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR	
Ryan A. Smith 14 Featherwood Irvine, CA 92612	San Diego County Credit Union PO Box 269040 San Diego, CA 92196-9040	_
Ryan A. Smith 14 Featherwood Irvine, CA 92612	Usa Fed Credit Union P.O. Box 26339 San Diego, CA 92196-0339	

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B6I (Official Form 6I) (12/07)

In re	Satin Sharee Klitzke		Case No.	
111 10		Debtor(s)	cuse 110.	

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF	F DEBTOR AND SP	OUSE		
Divorced	RELATIONSHIP(S): None.	AGE(S):			
Employment:	DEBTOR		SPOUSE		
Occupation	Office Manager		21 0 0 2 2		
Name of Employer	Production Systems, Inc.				
How long employed	21 months				
Address of Employer	12568 Kirkham Court Poway, CA 92064				
INCOME: (Estimate of avera	age or projected monthly income at time case filed)		DEBTOR		SPOUSE
1. Monthly gross wages, salar	ry, and commissions (Prorate if not paid monthly)	\$	3,813.33	\$	N/A
2. Estimate monthly overtime		\$	361.83	\$	N/A
3. SUBTOTAL		\$	4,175.16	\$_	N/A
4. LESS PAYROLL DEDUC	TTIONS				
 Payroll taxes and soci 	ial security	\$	1,086.06	\$	N/A
b. Insurance		\$	96.96	\$	N/A
c. Union dues		\$	0.00	\$	N/A
d. Other (Specify):	401(k) contribution	\$	108.33	\$	N/A
		\$	0.00	\$	N/A
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$	1,291.35	\$	N/A
6. TOTAL NET MONTHLY	TAKE HOME PAY	\$	2,883.81	\$_	N/A
7. Regular income from opera	ation of business or profession or farm (Attach detailed statem	nent) \$	0.00	\$	N/A
8. Income from real property	•	\$	0.00	\$	N/A
9. Interest and dividends		\$	0.00	\$	N/A
dependents listed above	support payments payable to the debtor for the debtor's use of	r that of \$	0.00	\$	N/A
11. Social security or governm		¢	0.00	¢	N/A
(Specify):			0.00	\$_	N/A N/A
12 Panaian an natinament in a	0000	<u> </u>	0.00	Φ_	N/A
12. Pension or retirement inco 13. Other monthly income	ome	Φ		Ф <u> </u>	
(Specify):		\$	0.00	\$_	N/A
		\$	0.00	ֆ	N/A
14. SUBTOTAL OF LINES 7	7 THROUGH 13	\$	0.00	\$_	N/A
15. AVERAGE MONTHLY	INCOME (Add amounts shown on lines 6 and 14)	\$	2,883.81	\$	N/A
16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals from line 1.5	5)	\$	2,883	.81

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

In re	Satin Sharee Klitzke		Case No.	
		Debtor(s)		

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22		e montiny
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,800.00
a. Are real estate taxes included? Yes No _X		
b. Is property insurance included? Yes No _X_		
2. Utilities: a. Electricity and heating fuel	\$	100.00
b. Water and sewer	\$	0.00
c. Telephone d. Other See Detailed Expense Attachment	\$	30.00 117.17
3. Home maintenance (repairs and upkeep)	ф 	50.00
4. Food	\$	240.00
5. Clothing	\$	200.00
6. Laundry and dry cleaning	\$	40.00
7. Medical and dental expenses	\$	30.00
8. Transportation (not including car payments)	\$	200.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	Φ.	40.00
a. Homeowner's or renter's	\$	12.83 9.15
b. Life c. Health	\$ 	0.00
d. Auto	\$ 	131.90
	\$	0.00
e. Other 12. Taxes (not deducted from wages or included in home mortgage payments)	T	
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	316.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other	\$	0.00
Other	5	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	3,277.05
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	=	
a. Average monthly income from Line 15 of Schedule I	\$	2,883.81
b. Average monthly expenses from Line 18 above	\$	3,277.05
c. Monthly net income (a. minus b.)	\$	-393.24

Case 09-04833-PB7 Filed 04/14/09 Entered 04/14/09 16:31:15 Doc 1 Pg. 28 of 54

B6J (Official Form 6J) (12/07)							
In re Satin Sharee Klitzke	Case No.						
Debtor(s)							
SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment							
Other Utility Expenditures:							
Cable TV	\$	101.17					
Internet service	\$	16.00					

117.17

Total Other Utility Expenditures

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Southern District of California

In re	Satin Sharee Klitzke		Case No.							
		Debtor(s)	Chapter	7						
	DECLARATION CONCE	RNING DEBTO	OR'S SCHEDUL	ES						
	DECLARATION UNDER PENALT	Y OF PERJURY BY	Y INDIVIDUAL DE	BTOR						
		I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of								
	sneets, and that they are true and correct to the	23 sheets, and that they are true and correct to the best of my knowledge, information, and belief.								
Date	April 14, 2009 Signate	ire /s/ Satin Share	e Klitzke							
		Satin Sharee F	(litzke							
		Debtor								

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (12/07)

United States Bankruptcy Court Southern District of California

In re	Satin Sharee Klitzke			
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$11,792.00	SOURCE Gross income received by debtor from employment with Production Assembly Systems, Inc.since January 1, 2009.
\$50,662.00	Gross income received by debtor from employment with Production Assembly Systems, Inc. in 2008.
\$25,557.00	Gross income received by debtor from employment with Production Assembly Systems, Inc. in 2007.
\$7,435.44	Gross income received by debtor from employment with Advanced Communications Solutions in 2007.
\$4,363.68	Gross income received by debtor from employment with Taber Company, Inc. in 2007.

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID OWING

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR VALUE OF AMOUNT STILL PAYMENTS/ NAME AND ADDRESS OF CREDITOR **TRANSFERS TRANSFERS OWING**

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR Al and Virginia Smith 3812 N. Ashwood Orange, CA 92865-1309 Ex-in laws.

DATE OF PAYMENT AMOUNT PAID April 2008 through \$2,205.00 December 2008.

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE DESCRIPTION AND VALUE OF BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE **PROPERTY**

AMOUNT STILL

OWING

\$0.00

2.

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF
PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

3

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF

OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

Josh Chambers 9993 Cheyenne Circle Ventura, CA 93004-3501 Ex-husband DATE

March 6, 2009

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Debtor transferred her ownership interest in exhusband's 2004 Chevrolet Trailblazer Sport Utility. Debtor was co-owner as well as co-signer on loan with Premier America Credit Union. Ex-husband paid off the balance of \$10, 899.59 owed to Premier America. Value of vehicle at time of transfer was approximately \$7700.00.

4

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

US Bank PO Box 1800 Saint Paul, MN 55101-0800

Wells Fargo Bank PO Box 6995 Portland, OR 97228-6995

Wells Fargo Bank PO Box 6995 Portland, OR 97228-6995 TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

Checking account, number -2186. Final balance \$0.00

Checking account, number -9781, final balance was zero.

Savings account, number 1334, balance of zero.

AMOUNT AND DATE OF SALE OR CLOSING

February 20, 2009

Closed on May 21, 2008, \$16.71 withdrawn on closing

Closed May 1, 2008. \$50.01 withdrawn on closing day.

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

5

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 29747 Canyon Way Court Escondido CA 92026 NAME USED
Satin Klitzke-Smith

DATES OF OCCUPANCY
February 2007 until February

2008

3100 Puesta Del Sol, # 103

Satin Klitzke-Smith

May 2006 until February 2007

Corona, CA 92882

155 Santa Barabara Irvine, Ca 92606 Satin Klitzke

May 2005 until May 2006

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Ryan Alexander Smith Joshua Lee Chambers

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

ENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

6

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None a

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS**

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

DATE OF INVENTORY INVENTORY SUPERVISOR

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above. None

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the

commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS AMOUNT OF MONEY DATE AND PURPOSE OR DESCRIPTION AND OF RECIPIENT.

RELATIONSHIP TO DEBTOR OF WITHDRAWAL VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 14, 2009
Signature /s/ Satin Sharee Klitzke
Satin Sharee Klitzke
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court

	Southern Distr	ict of California		
In re Satin Sharee Klitzke	r		Case No.	7
	L	Debtor(s)	Chapter	7
CHAPTER 7 INI	DIVIDUAL DEBTO	R'S STATEMENT	OF INTEN	TION
PART A - Debts secured by property of property of the estate. Attach a			ed for EACI	H debt which is secured by
Property No. 1				
Creditor's Name: San Diego County Credit Union		Describe Property So 2005 Chevrolet Subu		
Property will be (check one): ■ Surrendered	☐ Retained			
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		id lien using 11 U.S.C.	§ 522(f)).	
Property is (check one):		= xx		
☐ Claimed as Exempt		Not claimed as exe	mpt	
Property No. 2				
Creditor's Name: San Diego County Credit Union		Describe Property So 2007 Honda Civic LX Location: 13560 Con	Sedan 4 doo	or.
Property will be (check one): ☐ Surrendered	■ Retained			
If retaining the property, I intend to (check ☐ Redeem the property ■ Reaffirm the debt ☐ Other. Explain		id lien using 11 U.S.C.	§ 522(f)).	
Property is (check one): ■ Claimed as Exempt		☐ Not claimed as exe	mpt	
PART B - Personal property subject to unex Attach additional pages if necessary.)	apired leases. (All three	columns of Part B mus	st be complete	ed for each unexpired lease.
Property No. 1				
Lessor's Name: Elisa Ballard	Describe Leased Pro Debtor is a tenant or		Lease will be U.S.C. § 365	Assumed pursuant to 11 (p)(2):

YES

□ NO

B8 (Form 8) (12/08) Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date April 14, 2009 Signature /s/ Satin Sharee Klitzke
Satin Sharee Klitzke

Debtor

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United States Bankruptcy Court Southern District of California

In re	Satin Sharee Klitzke		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	IPENSATION OF ATTOI	RNEY FOR DI	EBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Bankrupto compensation paid to me within one year before the rendered on behalf of the debtor(s) in contemple.	he filing of the petition in bankruptcy	y, or agreed to be pa	id to me, for services rendered or	
	For legal services, I have agreed to accept		\$	1,800.00	
	Prior to the filing of this statement I have reco	eived	\$	600.00	
	Balance Due		\$	1,200.00	
2.	The source of the compensation paid to me was:				
	☐ Debtor ■ Other (specify): R	lyan A. Smith			
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are mem	bers and associates of my law firm	n.
	☐ I have agreed to share the above-disclosed corcopy of the agreement, together with a list of t				
5.	In return for the above-disclosed fee, I have agree	d to render legal service for all aspect	ts of the bankruptcy	case, including:	
l	a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedule c. Representation of the debtor at the meeting of d. [Other provisions as needed] Negotiations with secured creditor reaffirmation agreements and appl 522(f)(2)(A) for avoidance of liens of	es, statement of affairs and plan which creditors and confirmation hearing, and s to reduce to market value; ex- cications as needed; preparation	n may be required; nd any adjourned hea emption planning	arings thereof;	
5. l	By agreement with the debtor(s), the above-disclosure Representation of the debtors in an any other adversary proceeding.			es, relief from stay actions o	or
		CERTIFICATION			
	I certify that the foregoing is a complete statement bankruptcy proceeding.	of any agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in	
Dated	d: April 14, 2009	/s/ Richard L. Ste	evenson		
	-	Richard L. Steve	nson 239705		
		The Law Office o 7670 Opportunity		enson	
		San Diego, CA 92	2111		
		858-337-9557 Fa			
		rls@rls-law.com			

CSD 1008 [08/21/00] Name, Address, Telephone No. & I.D. No. Richard L. Stevenson 239705 7670 Opportunity Road, Ste. 230 San Diego, CA 92111 858-337-9557 239705	
UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991	
In Re Satin Sharee Klitzke	BANKRUPTCY NO.
Debtor.	
VERIFICATION OF CREDITO	OR MATRIX
PART I (check and complete one):	
New petition filed. Creditor <u>diskette</u> required.	TOTAL NO. OF CREDITORS: 34
□ Conversion filed on See instructions on reverse side. □ Former Chapter 13 converting. Creditor diskette required. □ Post-petition creditors added. Scannable matrix required. □ There are no post-petition creditors. No matrix required.	TOTAL NO. OF CREDITORS:
 □ Amendment or Balance of Schedules filed concurrently with this original scannal Equity Security Holders. See instructions on reverse side. □ Names and addresses are being ADDED. □ Names and addresses are being DELETED. □ Names and addresses are being CORRECTED. 	ble matrix affecting Schedule of Debts and/or Schedule of
PART II (check one):	
■ The above-named Debtor(s) hereby verifies that the list of creditors is true and co	rrect to the best of my (our) knowledge.
☐ The above-named Debtor(s) hereby verifies that there are no post-petition credito the filing of a matrix is not required.	rs affected by the filing of the conversion of this case and that
Date: April 14, 2009 /s/ Satin Sharee Klitzke	ie
Satin Snaree Klitzke	

Signature of Debtor

CSD 1008 (Page 2) [08/21/00]

INSTRUCTIONS

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with <u>Verification</u> is required whenever the following occurs:
 - a) A new petition is filed. Diskette required.
 - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
 - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be <u>originally</u> typed or printed. It may not be a copy.

4) CONVERSIONS:

- a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, <u>ALL</u> creditors must be listed on the mailing matrix at the time of filing and accompanied by a <u>Verification</u>. Diskette required.
- b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, <u>only post-petition creditors need be listed on the mailing matrix</u>. The matrix and <u>Verification</u> must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
 - a) <u>Scannable matrix format required.</u>
 - b) The matrix with <u>Verification</u> is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
 - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the REVERSE side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.

Accounts Receivable Mgmt PO Box 129 Thorofare, NJ 08086-0129

Alliance One Receivables Mgmt 1160 Centre Point Dr., Ste. 1 Saint Paul, MN 55120

American Express P.O. Box 981537 El Paso, TX 79998-1537

Bank Of America PO Box 15726 Wilmington, DE 19850-5726

Capital One PO Box 30281 Salt Lake City, UT 84130-0281

Chase PO Box 15298 Wilmington, DE 19850-5298

ChexSystems Attn: Consumer Relations 7805 Hudson Rd, Ste. 100 Saint Paul, MN 55125-1703

Citi PO Box 6241 Sioux Falls, SD 57117

Citi-Shell Shell Card Center PO Box 689151 Des Moines, IA 50368-9151 Creditors Interchange 80 Holtz Drive Buffalo, NY 14225

Department Stores Nat'l Bank Po Box 8066 Mason, OH 45040

Elisa Ballard 14142 Palisades Drive Poway, CA 92064

Encore Receivable Managment 400 N. Rogers Rd PO Box 3330 Olathe, KS 66063-3330

Equifax PO Box 740256 Atlanta, GA 30374-0256

Experian PO Box 9554 Allen, TX 75013-9554

Franchise Tax Board Bankruptcy Unit PO Box 2952 Sacramento, CA 95812-2952

GC Services LP Collection Agency Division 6330 Gulfton Houston, TX 77081

GE Money Bank Attn: Bankruptcy Dept. PO Box 103104 Roswell, GA 30076 Home Depot Credit Services PO Box 689100 Des Moines, IA 50368-9100

HSBC-Reward Zone Program Mastercard PO Box 80045 Salinas, CA 93912-0045

Internal Revenue Service Insolvency Group 1 880 Front Street San Diego, CA 92101-7776

Internal Revenue Service Cent. Insolvency Operations PO Box 21126 Philadelphia, PA 19114-0326

Nordstrom FSB Po Box 13589 Scottsdale, AZ 85267

North Shore Agency, Inc. 270 Spagnoli Road Melville, NY 11747

Omni Credit Services of FL PO Box 23381 Tampa, FL 33623-3381

People Magazine Customer Service PO Box 6001 Tampa, FL 33660-0001

Ryan A. Smith 14 Featherwood Irvine, CA 92612 San Diego County Credit Union PO Box 269040 San Diego, CA 92196-9040

Shedrick O Davis III JP Morgan Chase 300 S. Grand Ave., 4th Floor Los Angeles, CA 90071

Telecheck Services 5251 Westheimer Houston, TX 77056

TransUnion PO Box 2000 Crum Lynne, PA 19022-2002

United Recovery Systems PO Box 722929 Houston, TX 77272-2929

Usa Fed Credit Union P.O. Box 26339 San Diego, CA 92196-0339

WFNNB

Attn: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125

Case 09-04833-PB7 Filed 04/14/09 Entered 04/14/09 16:31:15 Doc 1 Pg. 47 of 54

B22A (Official Form 22A) (Chapter 7) (12/08)

In re	Satin Sharee Klitzke	
	Debtor(s)	According to the information required to be entered on this statement
Case N	Number:	(check one box as directed in Part I, III, or VI of this statement):
	(If known)	☐ The presumption arises.
		■ The presumption does not arise.
		☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	 a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	 b. □ I am performing homeland defense activity for a period of at least 90 days /or/ □ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the 2 purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. ☐ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Debtor's Spouse's the filing. If the amount of monthly income varied during the six months, you must divide the Income Income six-month total by six, and enter the result on the appropriate line. 3 Gross wages, salary, tips, bonuses, overtime, commissions. 4,226.13 \\$ **Income from the operation of a business, profession or farm.** Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. 4 Debtor Spouse 0.00 Gross receipts 0.00 \$ Ordinary and necessary business expenses Business income Subtract Line b from Line a 0.00 Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse Gross receipts 0.00 | \$ Ordinary and necessary operating expenses 0.00 | \$ Rent and other real property income Subtract Line b from Line a 0.00 6 Interest, dividends, and royalties. \$ 0.00 7 Pension and retirement income. 0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that 8 purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. 0.00 **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to **0.00** Spouse \$ be a benefit under the Social Security Act | Debtor \$ 0.00 **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse \$ Total and enter on Line 10 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11 Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). 4,226.13

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		4,226.13
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	50,713.56
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: CA b. Enter debtor's household size: 1	\$	49,182.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. ☐ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.	does no	ot arise" at the
	■ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Complete 1 and	51V, V, VI, and VII	or tins	statement omy ii required.	(See Line 13.)		
	Part IV. CALCULA	ATION OF CUR	REN'	T MONTHLY INCOM	ME FOR § 707(b) (2)	2)	
16	Enter the amount from Line 12.					\$	4,226.13
17	Marital adjustment. If you checked Column B that was NOT paid on a dependents. Specify in the lines bel spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zer	regular basis for the ow the basis for excl support of persons opurpose. If necessary	househouding the	old expenses of the debtor or the Column B income (such a an the debtor or the debtor's of	the debtor's s payment of the dependents) and the		
	a.			\$			
	b.			\$ \$			
	c. d.			\$			
	Total and enter on Line 17			Ψ		\$	0.00
18	Current monthly income for § 70	7(h)(2) Subtract Lir	o 17 fr	om Line 16 and enter the resu	ılt	\$	4,226.13
10	<u>-</u>					Þ	4,220.13
	Part V. C.	ALCULATION	OF D	EDUCTIONS FROM	INCOME		
	Subpart A: Dec	ductions under St	andaro	ls of the Internal Revenu	e Service (IRS)		
19A	National Standards: food, clothin Standards for Food, Clothing and C www.usdoj.gov/ust/ or from the cle	Other Items for the ap	plicable			\$	517.00
19B	National Standards: health care. Pocket Health Care for persons und Health Care for persons 65 years of clerk of the bankruptcy court.) Ente of age, and enter in Line b2 the nur number of household members mus obtain a total amount for household b2 to obtain a total amount for house c2 to obtain a total health care amo Household members under (ler 65 years of age, as fage or older. (This is er in Line b1 the number of members of yet be the same as the lamembers under 65, sehold members 65 a unt, and enter the reset of years of age	nd in Li nformat ber of r our hou number and ent nd olde ult in L	ne a2 the IRS National Standion is available at www.usdo nembers of your household wasehold who are 65 years of a stated in Line 14b.) Multiplyer the result in Line c1. Multiplyer, and enter the result in Line ine 19B.	lards for Out-of-Pocket j.gov/ust/ or from the who are under 65 years ge or older. (The total v Line al by Line bl to iply Line a2 by Line c2. Add Lines c1 and		
	a1. Allowance per member	60		Allowance per member	144		
	b1. Number of members c1. Subtotal	60.00	b2.	Number of members Subtotal	0.00	d.	00.00
						\$	60.00
20A	Local Standards: housing and uti Utilities Standards; non-mortgage e						
2011	available at www.usdoj.gov/ust/ or				ms mormation is	\$	452.00

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy or Monthly Payments for any debts secured by your home, as stated in L the result in Line 20B. Do not enter an amount less than zero.	ty and household size (this information is ourt); enter on Line b the total of the Average	
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,400.00	
	b. Average Monthly Payment for any debts secured by your	¢ 0.00	
	home, if any, as stated in Line 42 c. Net mortgage/rental expense	\$ 0.00 Subtract Line b from Line a.	\$ 1,400.00
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:	that the process set out in Lines 20A and led under the IRS Housing and Utilities	
			\$ 0.00
	Local Standards: transportation; vehicle operation/public transpo You are entitled to an expense allowance in this category regardless o vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expens included as a contribution to your household expenses in Line 8.	f whether you pay the expenses of operating a	
22A	$\square 0 \blacksquare 1 \square 2 \text{ or more.}$		
	If you checked 0, enter on Line 22A the "Public Transportation" amout Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/ or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/ or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at https://www.usdoj.gov/ust/ or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at https://www.usdoj.gov/ust/ or more, and the control of the applicable number of the control of the applicable number of the applicable number of the control of the applicable number of the	"Operating Costs" amount from IRS Local applicable Metropolitan Statistical Area or	. 244.00
		• • •	\$ 244.00
22B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Transportation. (This amount is available at <a amount="" from="" href="https://www.usdoj.go.go.go.go.go.go.go.go.go.go.go.go.go.</td><td>you are entitled to an additional deduction for nsportation" irs="" local<="" td=""><td>\$ 0.00</td>	\$ 0.00	
	court.) Local Standards: transportation ownership/lease expense; Vehicle	1 Cheat the number of vehicles for which	\$ 0.00
	you claim an ownership/lease expense. (You may not claim an owners vehicles.)		
	■ 1 □ 2 or more.		
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Linthe result in Line 23. Do not enter an amount less than zero.	court); enter in Line b the total of the Average	
	a. IRS Transportation Standards, Ownership Costs	\$ 489.00	
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42	\$ 316.00	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$ 173.00
24	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Lin the result in Line 24. Do not enter an amount less than zero.	IRS Local Standards: Transportation court); enter in Line b the total of the Average	
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00	
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 42 c. Net ownership/lease expense for Vehicle 2	\$ 0.00 Subtract Line b from Line a.	
25	Other Necessary Expenses: taxes. Enter the total average monthly exstate and local taxes, other than real estate and sales taxes, such as inc	xpense that you actually incur for all federal, ome taxes, self employment taxes, social	\$ 0.00
	security taxes, and Medicare taxes. Do not include real estate or sale	s taxes.	\$ 945.33

26	Other Necessary Expenses: involuntary deductions for endeductions that are required for your employment, such as re Do not include discretionary amounts, such as voluntary	etirement contributions, union dues, and uniform costs.	\$	0.00
27	Other Necessary Expenses: life insurance. Enter total avelife insurance for yourself. Do not include premiums for in any other form of insurance.		\$	9.15
28	Other Necessary Expenses: court-ordered payments. En pay pursuant to the order of a court or administrative agency include payments on past due obligations included in Lin	y, such as spousal or child support payments. Do not	\$	0.00
29	Other Necessary Expenses: education for employment or the total average monthly amount that you actually expend f education that is required for a physically or mentally challe providing similar services is available.	For education that is a condition of employment and for	\$	0.00
30	Other Necessary Expenses: childcare. Enter the total aver childcare - such as baby-sitting, day care, nursery and presch		\$	0.00
31	Other Necessary Expenses: health care. Enter the total average health care that is required for the health and welfare of you insurance or paid by a health savings account, and that is in include payments for health insurance or health savings.	rself or your dependents, that is not reimbursed by excess of the amount entered in Line 19B. Do not	\$	0.00
32	Other Necessary Expenses: telecommunication services. actually pay for telecommunication services other than your pagers, call waiting, caller id, special long distance, or interwelfare or that of your dependents. Do not include any amount of the control of the	basic home telephone and cell phone service - such as net service - to the extent necessary for your health and	\$	16.00
				2.046.40
33	Note: Do not include any expen	Living Expense Deductions ses that you have listed in Lines 19-32	\$	3,816.48
33	Subpart B: Additiona	I Living Expense Deductions ses that you have listed in Lines 19-32 ngs Account Expenses. List the monthly expenses in	\$	3,610.46
33	Subpart B: Additional Note: Do not include any expen Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably	I Living Expense Deductions ses that you have listed in Lines 19-32 ngs Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your	\$	3,610.46
	Subpart B: Additional Note: Do not include any expen Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably adependents.	I Living Expense Deductions sees that you have listed in Lines 19-32 ngs Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50		3,810.48
	Subpart B: Additional Note: Do not include any expen Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably a dependents. a. Health Insurance	I Living Expense Deductions sees that you have listed in Lines 19-32 ngs Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 0.00	\$	3,816.48 89.50
	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance Subscription Disability Insurance Subscription Subscri	I Living Expense Deductions sees that you have listed in Lines 19-32 ngs Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 0.00		
	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below:	I Living Expense Deductions ses that you have listed in Lines 19-32 logs Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 9 0.00 1 0.00		
	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$	I Living Expense Deductions ses that you have listed in Lines 19-32 lings Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 0.00 1 0.00 1 actual total average monthly expenditures in the space		
	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$	I Living Expense Deductions ses that you have listed in Lines 19-32 lings Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 0.00 r actual total average monthly expenditures in the space lily members. Enter the total average actual monthly d necessary care and support of an elderly, chronically		
34	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$ Continued contributions to the care of household or famile expenses that you will continue to pay for the reasonable an ill, or disabled member of your household or member of your expenses.	I Living Expense Deductions ses that you have listed in Lines 19-32 lings Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 0.00 r actual total average monthly expenditures in the space ly members. Enter the total average actual monthly d necessary care and support of an elderly, chronically ar immediate family who is unable to pay for such		
34	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$	I Living Expense Deductions ses that you have listed in Lines 19-32 ligs Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8. 89.50 6. 0.00 If actual total average monthly expenditures in the space Ily members. Enter the total average actual monthly d necessary care and support of an elderly, chronically ar immediate family who is unable to pay for such reasonably necessary monthly expenses that you rethe Family Violence Prevention and Services Act or	\$	89.50
34	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$ Continued contributions to the care of household or family expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of you expenses. Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under other applicable federal law. The nature of these expenses is Home energy costs. Enter the total average monthly amount Standards for Housing and Utilities, that you actually expentrustee with documentation of your actual expenses, and	I Living Expense Deductions ses that you have listed in Lines 19-32 Ings Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 0.00 The actual total average monthly expenditures in the space of the space o	\$ \$	0.00
34 35 36	Note: Do not include any expen Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$ Continued contributions to the care of household or family expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of you expenses. Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under other applicable federal law. The nature of these expenses is Home energy costs. Enter the total average monthly amount Standards for Housing and Utilities, that you actually expentrustee with documentation of your actual expenses, and claimed is reasonable and necessary.	I Living Expense Deductions ses that you have listed in Lines 19-32 Ings Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8 89.50 6 0.00 The actual total average monthly expenditures in the space of the spac	\$	0.00
34 35 36	Subpart B: Additional Note: Do not include any expension Health Insurance, Disability Insurance, and Health Saving the categories set out in lines a-c below that are reasonably adependents. a. Health Insurance b. Disability Insurance c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$ Continued contributions to the care of household or family expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of you expenses. Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under other applicable federal law. The nature of these expenses is Home energy costs. Enter the total average monthly amount Standards for Housing and Utilities, that you actually expentrustee with documentation of your actual expenses, and	I Living Expense Deductions ses that you have listed in Lines 19-32 Ings Account Expenses. List the monthly expenses in necessary for yourself, your spouse, or your 8	\$ \$	0.00

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39	ex St or	pen and fro	ses exceed the combined allowards, not to exceed 5% of those of the clerk of the bankruptcy countries.	e. Enter the total average monthly amnees for food and clothing (apparel an combined allowances. (This information). You must demonstrate that the	d servic	es) in the IRS ailable at <u>ww</u> y	National v.usdoj.gov/ust/		
	re	aso	nable and necessary.					\$	0.00
40				Enter the amount that you will conting anization as defined in 26 U.S.C. §			e form of cash or	\$	0.00
41	To	otal	Additional Expense Deduction	s under § 707(b). Enter the total of I	Lines 34	through 40		\$	89.50
			S	ubpart C: Deductions for De	bt Pav	ment		Ψ	00.00
42	ov an an ba	vn, id cl nou inkr	re payments on secured claims. list the name of the creditor, iden neck whether the payment includ nts scheduled as contractually du	For each of your debts that is secured tify the property securing the debt, an es taxes or insurance. The Average M e to each Secured Creditor in the 60 resessary, list additional entries on a sep 2.	by an indicate of the state of	nterest in prop the Average Mayment is the collowing the ge. Enter the	Monthly Payment, total of all filing of the total of the		
			Name of Creditor	Property Securing the Debt	Ave	rage Monthly Payment			
		a.	San Diego County Credit Union	2005 Chevrolet Suburban 1500 Sport Utility	\$	350.53	□yes ■no		
		b.	San Diego County Credit Union	2007 Honda Civic LX Sedan 4 door. Location: 13560 Comuna Drive, Poway CA	\$	316.00	□yes ■no		
		υ.	Official	Drive, Foway CA		al: Add Lines	Layes — no	\$	666.53
43	yo pa su	our o syme ms e fo	deduction 1/60th of any amount (ents listed in Line 42, in order to in default that must be paid in or llowing chart. If necessary, list a	sary for your support or the support of (the "cure amount") that you must pay maintain possession of the property. der to avoid repossession or foreclosud ditional entries on a separate page.	the creating the cure	ditor in addition amount wou and total any	on to the ld include any such amounts in		
			Name of Creditor	Property Securing the Debt	Φ.	1/60th of th	e Cure Amount		
		a.	-NONE-		\$	Т	otal: Add Lines	\$	0.00
44	pr	iori		ims. Enter the total amount, divided by claims, for which you were liable at a sthose set out in Line 28.		all priority cl	aims, such as		0.00
	C	hap	ter 13 administrative expenses.	If you are eligible to file a case under	· Chapte	r 13, complet	e the following	<u> </u>	0.00
			multiply the amount in line a by	the amount in line b, and enter the re					
45	a b		Projected average monthly Ch	apter 13 plan payment. strict as determined under schedules	\$		0.00		
7-3	$\ ^{\circ}$	•		e for United States Trustees. (This					
				w.usdoj.gov/ust/ or from the clerk of	v		8.90		
	c		the bankruptcy court.) Average monthly administrative	ve expense of Chapter 13 case	X Total:	Multiply Lin		\$	0.00
46					\$	666.53			
			Si	ubpart D: Total Deductions f	rom I	ncome		T *	220.00
47	To	otal	of all deductions allowed under	r § 707(b)(2). Enter the total of Lines	33, 41,	and 46.		\$	4,572.51
			Part VI. DE	TERMINATION OF § 707(I	o)(2) P	RESUMP'	TION		
48	Eı	nter	the amount from Line 18 (Cur	rent monthly income for § 707(b)(2))			\$	4,226.13
49	Eı	nter	the amount from Line 47 (Total	al of all deductions allowed under §	707(b)	(2))		\$	4,572.51
50	M	ont	hly disposable income under §	707(b)(2). Subtract Line 49 from Line	e 48 and	enter the resi	ılt.	\$	-346.38
	_								

51	1 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.					
	Initial presumption determination. Check the applicable box and proceed as directed.	\$ -20,782.80				
52	■ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of pastatement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.	ge 1 of this				
32	☐ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top of statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remaind					
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Line	es 53 through 55).				
53	Enter the amount of your total non-priority unsecured debt	\$				
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$				
	Secondary presumption determination. Check the applicable box and proceed as directed.					
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise of this statement, and complete the verification in Part VIII.	e" at the top of page 1				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.	on arises" at the top				
	Part VII. ADDITIONAL EXPENSE CLAIMS					
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the you and your family and that you contend should be an additional deduction from your current monthly income undo 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average neach item. Total the expenses.	er §				
56	Expense Description Monthly Amour	nt				
	a. \$ \$ b. \$	_				
	c. \$	\dashv				
	d. \$	\exists				
	Total: Add Lines a, b, c, and d \$					
	Part VIII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a join must sign.)	t case, both debtors				
57	Date: April 14, 2009 Signature: /s/ Satin Sharee Klitzke Satin Sharee Klitzke (Debtor)					

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2008 to 03/31/2009.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment with Production Assembly Syst

Income by Month:

6 Months Ago:	10/2008	\$3,737.25
5 Months Ago:	11/2008	\$3,729.00
4 Months Ago:	12/2008	\$6,522.00
3 Months Ago:	01/2009	\$3,660.25
2 Months Ago:	02/2009	\$3,817.00
Last Month:	03/2009	\$3,891.25
	Average per month:	\$4,226,13